



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E268396**

| | | |
|---|--------------------------------------|---|
| INTERSTATE <input type="checkbox"/> | CITY STREET <input type="checkbox"/> | FIRE RESULTED <input type="checkbox"/> |
| STATE ROUTE <input checked="" type="checkbox"/> | OTHER <input type="checkbox"/> | STOLEN VEHICLE <input type="checkbox"/> |
| COUNTY RD <input type="checkbox"/> | PRIVATE WAY <input type="checkbox"/> | HIT & RUN INVOLVED <input type="checkbox"/> |

TRIBAL RESERVATION ☐

| | |
|---------------------|----------|
| CASE # | 13-02242 |
| LOCAL AGENCY CODING | |
| TOTAL # OF UNITS | 02 |
| OBJECT STRUCK | |

| | | | | | | | | | | | | | | | | |
|-------------------|----------------|-------------|------|----------|----|-------|--|---|---|---|---|----|----|------|--------|--|
| DATE OF COLLISION | 09 - 08 - 2013 | TIME (2400) | 1121 | COUNTY # | 31 | MILES | | N | S | E | W | IN | OF | 0664 | CITY # | |
|-------------------|----------------|-------------|------|----------|----|-------|--|---|---|---|---|----|----|------|--------|--|

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐

SR 9 SE BLOCK NO. ☐ MILE POST ☐

DISTANCE ☐ MILES ☐ N ☐ E ☐ S ☐ W ☐ OF (REFERENCE OR CROSS STREET) 20TH ST SE

| | | | | | |
|---------|---|--------------------------------------|--|-------|---------------|
| UNIT 01 | MOTOR VEHICLE <input checked="" type="checkbox"/> | PEDAL CYCLE <input type="checkbox"/> | DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | PHONE | D: 4253208257 |
|---------|---|--------------------------------------|--|-------|---------------|

| | | | | | |
|-----------|---------|------------|-------|----------------|---|
| LAST NAME | BALDWIN | FIRST NAME | HEIDE | MIDDLE INITIAL | A |
|-----------|---------|------------|-------|----------------|---|

| | |
|--------------------|------------------|
| STREET NEW ADDRESS | 315 S MADISON ST |
|--------------------|------------------|

| | | | | | |
|------|--------|----|----|-----|-----------|
| CITY | MONROE | ST | WA | ZIP | 982722218 |
|------|--------|----|----|-----|-----------|

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|-----|--------------|---|--------------|--|
| ODL | RESTRICTIONS | B | ENDORSEMENTS | |
|-----|--------------|---|--------------|--|

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|--------------------|--------------|-------|----|-----|---|-----------------|----------------|
| DRIVER'S LICENSE # | BALDWAH331KB | STATE | WA | SEX | F | D.O.B. MMDDYYYY | 05 - 02 - 1967 |
|--------------------|--------------|-------|----|-----|---|-----------------|----------------|

| | | | | | | | | | | | | | |
|---------|--------------------------|--------|--------|---|-------|---|-------|---|------------|--------------|---|--------------------|--|
| ON DUTY | <input type="checkbox"/> | STATUS | AIRBAG | 2 | RESTR | 4 | EJECT | 1 | HELMET USE | INJURY CLASS | 1 | NATURE OF INJURIES | |
|---------|--------------------------|--------|--------|---|-------|---|-------|---|------------|--------------|---|--------------------|--|

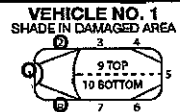
| | | | | | |
|-----------------|--------|-------|----|------|-------------------|
| LICENSE PLATE # | 515YUC | STATE | WA | VIN# | 1B4HS38N72F164471 |
|-----------------|--------|-------|----|------|-------------------|

| | | | | | | | |
|-----------------|--|-------|--|-----------------|--|-------|--|
| TRAILER PLATE # | | STATE | | TRAILER PLATE # | | STATE | |
|-----------------|--|-------|--|-----------------|--|-------|--|

| | | | | | | | | | | | |
|-----------|------|------|------|-------|-------|-------|--|---|----------|--|---|
| VEH. YEAR | 2002 | MAKE | DODG | MODEL | DURAN | STYLE | | VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | TOWED BY | | GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
|-----------|------|------|------|-------|-------|-------|--|---|----------|--|---|

REGISTERED OWNER INFO. CHRISTOPHER BALDWIN 315 S MADISON ST MONROE WA 98272 D: 4253208257

| | | | |
|-------------------------------|--|-------------------------|---|
| LIABILITY INSURANCE IN EFFECT | <input checked="" type="checkbox"/> | INSURANCE CO & POLICY # | AMERICAN FAMILY 2006-6687-01-76-FPPA-WA |
| VEHICLE LEGALLY STANDING | YES <input type="checkbox"/> NO <input type="checkbox"/> | CITATION # | |
| CHARGE | | | |



| | | | | | | | |
|---------|---|--------------------------------------|-------------------------------------|---|--|-------|---------------|
| UNIT 02 | MOTOR VEHICLE <input checked="" type="checkbox"/> | PEDAL CYCLE <input type="checkbox"/> | PEDESTRIAN <input type="checkbox"/> | PROPERTY OWNER <input type="checkbox"/> | DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | PHONE | D: 3606914900 |
|---------|---|--------------------------------------|-------------------------------------|---|--|-------|---------------|

| | | | | | |
|-----------|-------|------------|-------|----------------|---|
| LAST NAME | DOUMA | FIRST NAME | BRIAN | MIDDLE INITIAL | M |
|-----------|-------|------------|-------|----------------|---|

| | |
|--------------------|-------------------|
| STREET NEW ADDRESS | 8010 143RD AVE NE |
|--------------------|-------------------|

| | | | | | |
|------|--------------|----|----|-----|-----------|
| CITY | LAKE STEVENS | ST | WA | ZIP | 982580000 |
|------|--------------|----|----|-----|-----------|

| | | | | |
|-----|--------------|--|--------------|---|
| ODL | RESTRICTIONS | | ENDORSEMENTS | L |
|-----|--------------|--|--------------|---|

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|--------------------|--------------|-------|----|-----|---|-----------------|----------------|
| DRIVER'S LICENSE # | DOUMABM410Q0 | STATE | WA | SEX | M | D.O.B. MMDDYYYY | 11 - 20 - 1959 |
|--------------------|--------------|-------|----|-----|---|-----------------|----------------|

| | | | | | | | | | | | | | |
|---------|--------------------------|--------|--------|---|-------|---|-------|---|------------|--------------|---|--------------------|--|
| ON DUTY | <input type="checkbox"/> | STATUS | AIRBAG | 2 | RESTR | 4 | EJECT | 1 | HELMET USE | INJURY CLASS | 1 | NATURE OF INJURIES | |
|---------|--------------------------|--------|--------|---|-------|---|-------|---|------------|--------------|---|--------------------|--|

| | | | | | |
|-----------------|---------|-------|----|------|-------------------|
| LICENSE PLATE # | B64744W | STATE | WA | VIN# | 1FTMF1CM2DKD27417 |
|-----------------|---------|-------|----|------|-------------------|

| | | | | | | | |
|-----------------|--|-------|--|-----------------|--|-------|--|
| TRAILER PLATE # | | STATE | | TRAILER PLATE # | | STATE | |
|-----------------|--|-------|--|-----------------|--|-------|--|

| | | | | | | | | | | | |
|-----------|------|------|------|-------|------|-------|----|---|----------|--|---|
| VEH. YEAR | 2013 | MAKE | FORD | MODEL | F150 | STYLE | PK | VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | TOWED BY | | GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
|-----------|------|------|------|-------|------|-------|----|---|----------|--|---|

REGISTERED OWNER INFO. BRIAN DOUMA PO BOX 1020 GRANITE FALLS WA 98252 D: 3606914900

| | | | |
|-------------------------------|---|-------------------------|-----------------|
| LIABILITY INSURANCE IN EFFECT | <input checked="" type="checkbox"/> | INSURANCE CO & POLICY # | SAFECO H1706251 |
| VEHICLE LEGALLY STANDING | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | CITATION # | |
| CHARGE | | | |



| | | | | | |
|------------------------|--------------|---------------|-----|--------|-----------|
| OFFICER'S NAME (PRINT) | STEVE WARBIS | BADGE OR ID # | 112 | AGENCY | WA0311900 |
|------------------------|--------------|---------------|-----|--------|-----------|



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E268396**

CASE # **13-02242**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

| | | | | | | | | | | | |
|---------------------------------------|--------------------------|---------|--------------------------|--------|--------------|--------|--------|-------|---------------|-----------------|--------------------|
| NAME (LAST, FIRST, MIDDLE INITIAL) | | | | | | | | | | | |
| ADDRESS & PHONE # | | | | | | | | | | | |
| SEX | D.O.B. MMDDYYYY | | | | | | | | | | |
| PASSENGER | <input type="checkbox"/> | WITNESS | <input type="checkbox"/> | UNIT # | SEAT POS. | AIRBAG | RESTR. | EJECT | HELMET USE | INJURY CLASS | NATURE OF INJURIES |
| NAME (LAST, FIRST, MIDDLE INITIAL) | | | | | | | | | | | |
| ADDRESS & PHONE # | | | | | | | | | | | |
| SEX | D.O.B. MMDDYYYY | | | | | | | | | | |
| PASSENGER | <input type="checkbox"/> | WITNESS | <input type="checkbox"/> | UNIT # | SEAT POS. | AIRBAG | RESTR. | EJECT | HELMET USE | INJURY CLASS | NATURE OF INJURIES |
| NAME (LAST, FIRST, MIDDLE INITIAL) | | | | | | | | | | | |
| ADDRESS & PHONE # | | | | | | | | | | | |
| SEX | D.O.B. MMDDYYYY | | | | | | | | | | |
| PASSENGER | <input type="checkbox"/> | WITNESS | <input type="checkbox"/> | UNIT # | SEAT POS. | AIRBAG | RESTR. | EJECT | HELMET USE | INJURY CLASS | NATURE OF INJURIES |

NARRATIVE

Unit 2 stopped at stoplight with tailgate down and row boat in bed of truck southbound. Unit 1 was heading south on SR 9 and was slowing for the light. Unit 1 failed to stop in time, striking unit 2. Unit 1 sustained front end damage. Unit 2 sustained tailgate, bumper, bed, and cab damage. The boat, HIN # US-LBB20096J213, in the bed of unit 2 was also heavily damaged. Unit 2 taillights are on outside of bed and visible with tailgate down.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

STEVE WARBIS

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

09-08-13 12:36 PM

DATED

PLACE SIGNED

APPROVED BY

BOB SUMMERS 079

DATE

9/8/2013 1:44:35 PM

BADGE OR ID # **112**

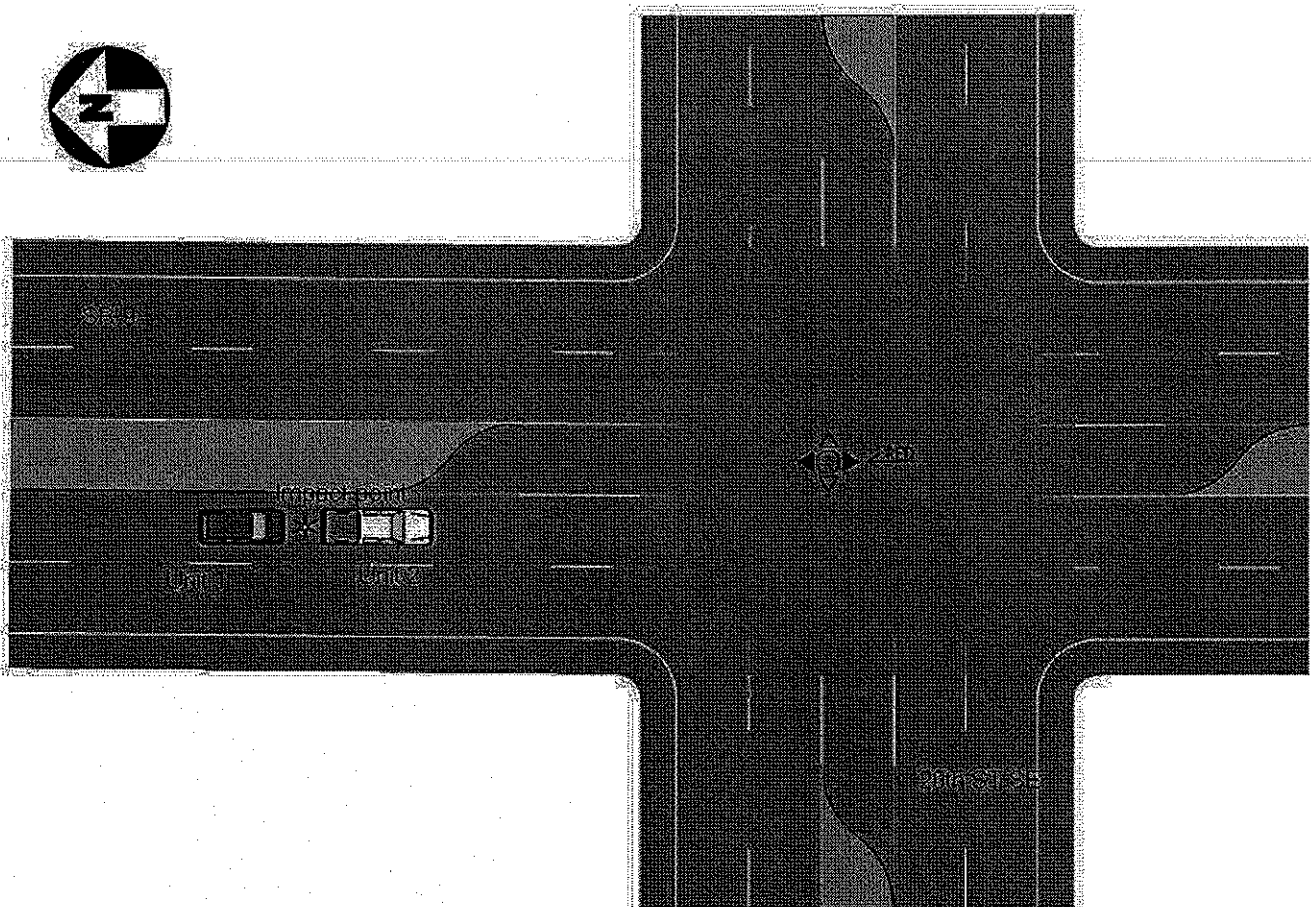
ORI # **WA0311900**

TIME POLICE DISPATCHED **11:23 AM**

TIME POLICE ARRIVED **11:27 AM**

PART B 3000-345-160 R (7/06)

PAGE **2** OF **3**



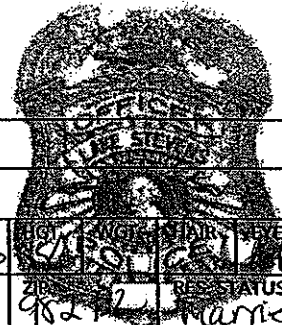
LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13-02242

VICTIM / WITNESS



| | | | | | | | | |
|--|--|-------------------------------------|----------|-------------|---------------------|--------------|-------------|-----------------------|
| NON-DISC <input type="checkbox"/> | NAME (LAST, FIRST MIDDLE) Baldwin Heide | RACE W | ETH W | SEX F | DOB 5/2/67 | AGE 46 | HAIR BLK | EYES BLU |
| STREET ADDRESS 17342 Mountain View Rd | | CITY Monroe | | STATE WA | | ZIP 98272 | | RES STATUS Married |
| HOME PHONE 4 | | CELL PHONE 425-320-8257 | | | PLACE OF EMPLOYMENT | | | |
| WORK PHONE | | EMAIL ADDRESS hugheide@gmail.com | | | | | | |

I, Heide Baldwin, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was coming down hwy 9 toward the 20th St light. I saw a line of cars in front of me and I didn't see any brake lights on in the truck in front of me. I started to slow down, but didn't slow down fast enough so I ran into his truck.

LSPD
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

| | | |
|--|------------------------|--------------------------------------|
| SIGNATURE: <u>Heide A Baldwin</u> 10/8/13 | DATE SIGNED 10/8/13 | LOCATION SIGNED on location |
| OFFICER/NUMBER: S. WARRISIN | DATE SIGNED 9-8-13 | LOCATION SIGNED LAKE STEVENS P.D. |

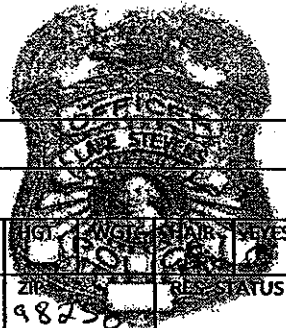
"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 13-02242



VICTIM / WITNESS

| | | | | | | | | | | |
|-------------------------------------|--|-----------|--------------------|--------------------|-----------------|---|-----------------|---------------|---------------|--------------|
| NON-DISC | NAME (LAST, FIRST MIDDLE) Doura Brian M | RACE W | ETH | SEX M | DOB 11-20-59 | AGE 53 | HEIGHT 5'10" | WEIGHT 180 | HAIR Brown | EYES Blue |
| STREET ADDRESS 8010 143rd Ave NE | | | | CITY LK Stevens | | STATE WA | | ZIP 98256 | | RES STATUS |
| HOME PHONE 360-691 4900 | | | CELL PHONE - | | | PLACE OF EMPLOYMENT ChermaK Construction | | | | |
| WORK PHONE 425-776-1367 | | | EMAIL ADDRESS - | | | 425-776-1376 | | | | |

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

At Approx 11:20 AM Sunday 9-9-13 I was stopped at A red light on South Bound Hwy 9 @ 20th St SE. I was in a Line of Approx. A Dozen Autos & I was Last in Line. I had been stopped for A minute or so. then I Look up in my rear view mirror just it time to see a red SUV Hit me from Behind, smacking into my rear tailgate that was Down - I was carrying my Fishing Boat at the Time - It is Ten feet long & Did not stick out past the edge of the Tail gate. I was on hiway 9, South Bound in the main Line of Traffic

BOAT HIN # US-LBB20096J213

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

| | | |
|---------------------------------|-----------------------|---------------------------------------|
| SIGNATURE: Brian Doura | DATE SIGNED 9-9-13 | LOCATION SIGNED Hwy 9 & 20th St SE |
| OFFICER/NUMBER: S. WAKES 112 | DATE SIGNED 9-9-13 | LOCATION SIGNED LAKE STEVENS P.D. |

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

Incident History for: #SS13020076

Case Numbers: \$SS13002242

Received 09/08/13 11:21:51 BY SPCT06 SP0377
Entered 09/08/13 11:23:03 BY SPCT06 SP0377
Dispatched 09/08/13 11:23:14 BY SPDP17 SP0147
Enroute 09/08/13 11:23:14
Onscene 09/08/13 11:27:22
Closed 09/08/13 12:16:22

Initial Type: ACC Initial Alarm Level: Final Alarm Level:
Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H
Police BLK: SS003 Fire BLK: AG1418 Map Page: 397E-3 Group: SS1 Beat: SOUT

Src: 9

Loc: 20 ST SE/SR 9 SE, LKS (V)

Latitude: (+) 47.978089 Longitude: (-) 122.102630

Loc Info: AT T MOBILITY,

Name: DOUMA, BRIAN

Addr:

Phone: 4252394419

/1123 (SP0377) ENTRY , ACC, NON INJ, NON BLOCKING WHI FORD PU V RED SU
V

/1123 (SP0147) DISPER SS1937 #SS112 WARBIS, OFFICER (STEVE)

/1127 (SS112) *ONSCNE SS1937

/1133 (SP0147) ASNCAS SS1937 \$SS13002242

/1216 (SS112) *CLEAR SS1937 D/H

/1216 CLOSE SS1937

LSPD
ORIGINAL